

P15000043891

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

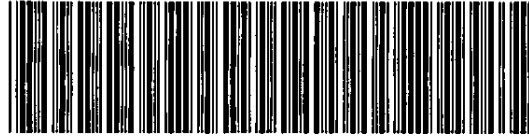
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200271084612

04/06/15--01010--002 **78.75

FILED
15 MAY 15 PM 3:41
CLERK OF STATE
TALLAHASSEE, FLORIDA

5-10-15-18

COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: Cloudy Dottie INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☒ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Katya Richman

Name (Printed or typed)

15 Crossings Circle Apt. A

Address

Boynton Beach, Florida 33435

City, State & Zip

954-918-8540

Daytime Telephone number

cloudy.dottie@gmail.com

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: Cloudy Dottie, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

15 Crossings Apt. A
Boynton Beach, Florida 33435

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Home based Business

ARTICLE IV SHARES

The number of shares of stock is: 8 100

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TALLAHASSEE, FLORIDA

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Katya Richman Owner Name and Title: _____

Address 15 Crossings Apt. A Address: _____
Boynton Beach, Florida
33435

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

(conti.)

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Katya Richman

Address: 15 Crossings Apt. A

Boynton Beach, Florida 33435

ARTICLE VII INCORPORATOR

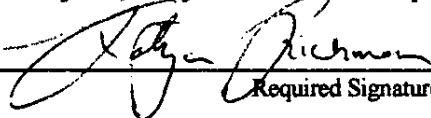
The name and address of the Incorporator is:

Name: Katya Richman

Address: 15 Crossings Apt. A

Boynton Beach, Florida 33435

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

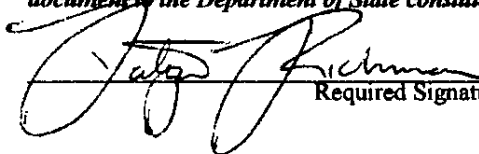


Required Signature/Registered Agent

2015/04/02

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Required Signature/Incorporator

2015/04/02

Date



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

15 MAY 15 PM 12:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

April 9, 2015

KATYA RICHMAN
15 CROSSINGS CIRCLE APT. A
BOYNTON BEACH, FL 33435

SUBJECT: CLOUDY DOTTIE
Ref. Number: W15000024681

We have received your document for CLOUDY DOTTIE and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Christine Haney
Regulatory Specialist II
New Filing Section

Letter Number: 915A00007074

FILED
15 MAY 15 PM 8:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA